FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

Section

SEC Mail Processing NOTICE OF SALE OF SECURITIES **PURSUANT TO REGULATION D,** SECTION 4(6), AND/OR

FEB 14 2008 UNIFORM LIMITED OFFERING EXEMPTION

	a average bure	
nours pe	r response:	16.00
	SEC USE	ONLY
Prefix		Serial
TOIR	1	1
	DATE REC	EIVED

April 30, 2008

3235-0076

OMB Number:

Expires:

Washington, DC			
110			
Name of Offering (check if this is an amendment			
Goldman Sachs Diversified Strategies Fund	d, L.P.: Limited Partnership Units	<u> </u>	
Filing Under (Check box(es) that apply): R	ule 504	☐ Section 4(6)	□ ULOE
Type of Filing: New Filing Amendme	ent		
	A. BASIC IDENTIFICATION DATA		
1. Enter the information requested about the issu	er		1867% COLO 1879 CHILL BURN SAUL BURN LOUI 1884 COL
Name of Issuer (check if this is an amendment	ent and name has changed, and indicate change.)		
Goldman Sachs Diversified Strategies Fund	d, L.P.		THE REPORT OF THE PROPERTY OF
	imber and Street, City, State, Zip Code)	Telephone	08040097
One New York Plaza, New York, New Yor	k 10004	(212) 902-1	000
	Number and Street, City, State, Zip Code)	Telephone Nun	nber (Including Area Code)
Brief Description of Business			
To operate as a private investment fun	d.		
			PROCESSE
Type of Business Organization		_	
☐ corporation	☑ limited partnership, already formed	□other (please	specify): FEB 2 1 2008
□ business trust	☐ limited partnership, to be formed		T + C040001
			THOMSON
	Month Year		FINANCIAL
Actual or Estimated Date of Incorporation or Org	anization: 1 1 0 7	☑ Actual	☐ Estimated
Jurisdiction of Incorporation or Organization:	(Enter two-letter U.S. Postal Service abbrevia	tion for	
,	State: CN for Canada; FN for other foreign ju		DE

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collections of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA
2. Enter the information requested for the following:
* Each promoter of the issuer, if the issuer has been organized within the past five years;
* Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
* Each executive officer and Director of corporate issuers and of corporate general and managing partners of partnership issuers; and
* Each general and managing partner of partnership issuers.
Check Box(es) that Apply: ☐ Promoter* ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or *Issuer's Investment Manager & sole Member of the Issuer's General Partner Managing Partner
Full Name (Last name first, if individual) Goldman Sachs Hedge Fund Strategies, LLC
Business or Residence Address (Number and Street, City, State, Zip Code)
One New York Plaza, New York, NY 10004
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☑ General and/or Managing Partner
Full Name (Last name first, if individual)
Goldman Sachs Access Funds GP, LLC
Business or Residence Address (Number and Street, City, State, Zip Code) One New York Plaza, New York, NY 10004
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director* ☐ General Partner and/or *of the sole Member of the Issuer's General Partner Managing Partner
Full Name (Last name first, if individual)
Barbetta, Jennifer
Business or Residence Address (Number and Street, City, State, Zip Code)
One New York Plaza, New York, NY 10004
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer* Director* General Partner and/or *of the sole Member of the Issuer's General Partner Managing Partner
Full Name (Last name first, if individual) Clark, Kent
Business or Residence Address (Number and Street, City, State, Zip Code) One New York Plaza, New York, NY 10004
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director* General Partner and/or *of the sole Member of the Issuer's General Partner Managing Partner
Full Name (Last name first, if individual) Asali, Omar
Business or Residence Address (Number and Street, City, State, Zip Code) One New York Plaza, New York, NY 10004
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director * General Partner and/or *of the sole Member of the Issuer's General Partner Managing Partner
Full Name (Last name first, if individual)
Ort, Peter Business or Residence Address (Number and Street, City, State, Zip Code)
One New York Plaza, New York, NY 10004
Check Box(es) that Apply:
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner Executive Officer ☐ Director ☐ General Partner and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)

	-	·		B. IN	FORMAT	ION ABO	UT OFFE	ERING		_		
								**			Yes	No
1. Has th	e issuer solo	i, or does th										\mathbf{Z}
			P	Answer also	in Appendi	ix, Column	2, if filing t	inder ULOF	Ξ.			
2. What is	s the minimur	n investment	that will be a	ccepted from	n any individu	ual?					\$ 200	
Subj	ect to the so	ole discretio	on of the G	eneral Part	iner to acce	pt lesser a	mounts.				2,00	00,000
				- C!1-							Yes ☑	No □
	3. Does the offering permit joint ownership of a single unit?4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any										ш	J
4. Enter	the informa ission or sin	tion reques	ted for each	h person w	ho has beer of purchase	n or will be rs in connec	e paid or gi ction with sa	iven, directi ales of secu	ly or indire rities in the	ctly, any offering.		
If a pe	rson to be li	sted is an a	ssociated pe	rson or age	nt of a brok	er or dealer	registered v	with the SE	C and/or wi	th a state		
or stat	es, list the ner or dealer,	ame of the	broker or de	ealer. If mo	ore than five	(5) person	s to be liste	d are associ	ated person	s of such		
	e (Last name				101 that ore	iker or deale		······································				
NONE	CLAST HAIR	5 111St, 11 111O	iividdai)									
D :	D 11			Canada Cia	. Ctata Tia	Code						
Business (or Residence	e Address (1	Number and	Street, City	y, State, Zip	Code)						
			<u> </u>									
Name of A	Associated E	Broker or De	ealer									
States in V	Which Perso	n Listed Ha	s Solicited	or Intends to	o Solicit Pu	rchasers						
(Check "	'All States"	or check inc	dividual Sta	tes)		· · · · · · · · · · · · · · · · · · ·				•		II States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	(DE)	[DC]	(FL)	[GA]	(HI)	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC] c (Last name	[SD]	[TN]	[TX]	[UT]_	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
ruii Name	e (Last name	e mrst, m ma	iividuai)									
				ia		<u> </u>						
Business of	or Residence	e Address (f	Number and	Street, City	y, State, Zip	(Code)						
			••					***				
Name of A	Associated E	Broker or De	ealer									
	Which Perso											l States
	'All States"						(DE)	moc)	 (ET)	[CA]	[HI]	[ID]
[AL]	[AK]	[AZ]	[AR]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] (MD)	[DC] [MA]	[FL] [MI]	[GA] [MN]	[MS]	[MO]
[IL] [MT]	(IN] (NE]	(IA) [NV]	[KS] [NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[MN] [OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
	(Last name			()					<u> </u>			. ,
								•				
Business of	or Residence	e Address (1	Number and	Street, Cit	v. State, Zip	Code)		·				
		`		,		•						
Name of	Associated E	Broker or De	-aler									
. tante of I	issociated L	JORGI OI DA										
Ctates in 1	Which Dage	n Listad II-	o Colicias	oe Intends :	o Colinia Dec	rahace						
	Which Perso 'All States'						•••••					All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	(CT)	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
	Type of Security		Aggregate Offering Price		,	Amount Already Sold
	Debt	\$_	0	\$		0
	Equity	\$_	0	\$	_	0
	□ Common □ Preferred					
	Convertible Securities (including warrants)	s _	0	\$		0
	Partnership Interests	\$	0	\$		0
	Other (Specify) Limted Partnership Units	\$	227,140,216	\$		227,140,216
	Total			\$		227,140,216
	Answer also in Appendix, Column 3, if filing under ULOE.	_				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		N. J.			Aggregate
			Number Investors			Dollar Amount of Purchases
	Accredited Investors		182	\$		227,140,216
	Non-accredited Investors		0	\$		0
	Total (for filings under Rule 504 only)		N/A	\$		N/A
	Answer also in Appendix, Column 4, if filing under ULOE.					
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		Type of Security			Dollar Amount Sold
	Type of offering Rule 505		N/A	\$		N/A
	Regulation A	_	N/A	\$	_	N/A
	Rule 504		N/A	\$	_	N/A
	Total		N/A	\$		N/A
tl tl	.a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		1011	•		
	Transfer Agent's Fees			\$	_	0
	Printing and Engraving Costs			\$	_	0
	Legal Fees		Ø	\$	_	86,800
	Accounting Fees			\$		0
	Engineering Fees			\$	_	0
	Sales Commissions (specify finders' fees separately)			\$	_	0
	Other Expenses (identify) legal and miscellaneous			\$		0
	Total		Ø	\$		86,800
					_	

C OFFEDING DDICE N	UMBER OF INVESTORS, EXP	ENS	ES A	ND USE OF P	ROCE	EDS	
b. Enter the difference between the aggreg - Question 1 and total expenses furnished difference is the "adjusted gross proceeds to	s		227,053,416				
i. Indicate below the amount of the adjusted at to be used for each of the purposes shown. furnish an estimate and check the box to payments listed must equal the adjusted gro to Part C - Question 4.b. above.	gross proceeds to the issuer used or pro- If the amount for any purpose is not ke the left of the estimate. The total	opose cnowr of th	d n, e		y _		· <u>····</u>
·				Payments to Officers, Directors, & Affiliates		٠	Payments To Others
Salaries and Fees			\$_	0	_ 🗆	\$_	0
Purchase of real estate			s _	0	_ 🗆	\$_	0
Purchase, rental or leasing and installation of	of machinery and equipment		\$_	0	_ 🗆	\$ <u>.</u>	0
Construction or leasing of plant buildings ar	nd facilities		\$_	0		\$_	0
Acquisition of other businesses (including this offering that may be used in exchan another issuer pursuant to a merger)	ge for the assets or securities of		\$	0	_	\$	0
Repayment of indebtedness			s –	0		\$	0
Working capital			s -	0	_	\$ ·	0
Other (specify): Investment capital			\$	0	- 2	\$	227,053,416
Column Totals			\$	0	- 0	\$ _	227,053,416
Total Payments Listed (column totals added)			EZ \$	227,0	53,41	6
	D. FEDERAL SIGNATUI	RE					
The issuer has duly caused this notice to be following signature constitutes an undertaking its staff, the information furnished by the issued	by the issuer to furnish to the U.S. Secu	urities	and	Exchange Commi	ssion, u	unde pon w	er Rule 505, the vritten request of
ssuer (Print or Type) Goldman Sachs Diversified Strategies Fund , L.P.	Signature R			Date February 3, 2	2008		·
Name of Signer (Print or Type)	Title of Signer (Print or Type)						
lennifer Barbetta	Director of the sole Member of Issue	er's (Gener	al Partner			

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).

